



Office of Public Health Practice

REQUEST FOR PROPOSALS (RFP)

for

Texas Department of Health Public Health Improvement Grants (Permanent Fund for Children and Public Health)

**For the Project Period:
September 1, 2003 through August 31, 2005**

**Issued:
October 3, 2002**

**Screening Applications Due:
December 3, 2002**

**Mario R. Anzaldúa, M.D.
Chair, Texas Board of Health**

**Eduardo Sanchez, M.D.
Texas Commissioner of Health**

Table of Contents

I.	Introduction	5
II.	Background, Legal Authority and Purpose.....	6
III.	Funding.....	7
IV.	Application Overview	8
	A. Grant Purpose	8
	B. Screening Application.....	8
	C. Full Application.....	8
	D. Proposal Categories.....	8
	E. Proposal Descriptions and Requirements	9
	1. Small Rural Projects.....	9
	2. TDH Priority Initiatives.....	11
	3. General Proposals.....	13
	4. Proposals Requesting Continuation Funding for FY2002 Grantees.....	16
V.	General Requirements.....	17
	A. Eligible Applicants	17
	B. Grant Period.....	17
	C. Schedule of Events for Application Process	17
VI.	Screening Application Content	18
	A. Screening Application Schedule of Events	18
	B. Screening Application Content.....	18
	1. Cover Page.....	18
	2. Proposal Description	18
	3. Proposed Budget Summary	20
	C. Screening Application Submission Requirements	21
	D. Screening Application Review Process.....	21
	1. Preliminary Review	21
	2. Review Committee.....	22
	3. Review Criteria.....	22
	E. Screening Application Selection Process.....	23
	F. Project Technical Assistance.....	24
	G. Screening Application Question and Answer Document.....	24
VII.	Full Application Overview.....	24
	A. Full Application Schedule of Events.....	24
	B. Full Application Content.....	24
	1. Face Page.....	24
	2. Application Checklist.....	25
	3. Table of Contents.....	25
	4. Contact Person Information.....	25
	5. Administrative Information.....	25
	6. Project Abstract.....	25
	7. Description of Target Population.....	25
	8. Organizational Experience.....	26

9.	Project Description and Work Plan.....	26
a.	Public Health Issue.....	27
b.	Project Goals and Objectives.....	27
c.	Essential Public Health Services.....	27
d.	Project Activities.....	27
e.	Collaboration.....	27
f.	Strengthening the Public Health Infrastructure.....	27
g.	Demonstration of a Strong Financial Commitment.....	28
h.	Project Cost Analysis.....	28
i.	Project Objectives Relative to the Goal of the Part for Which the Applicant is Applying.....	28
j.	Continuation Funding.....	28
10.	Performance Measures.....	29
11.	Quality Assurances.....	29
12.	Dissemination Plan.....	30
C.	Financial Information Required in Full Application.....	30
1.	Funding Information.....	30
2.	Budget.....	31
3.	Historically Underutilized Businesses (HUBs).....	31
4.	Nonprofit Board of Directors and Executive Director Assurances Form.....	31
5.	TDH Assurances and Certifications.....	32
D.	Full Application Submission Requirements.....	32
E.	Full Application Review Process.....	34
1.	Preliminary Review.....	34
2.	Review Committee.....	34
3.	Review Criteria.....	34
F.	Full Application Selection Process.....	36
1.	Review Panel.....	36
2.	Review and Selection Process.....	36
3.	Final Selection.....	36
G.	Applicant Conference.....	37
H.	Full Application Question and Answer Document.....	37
VIII.	Contract Negotiation.....	38
IX.	TDH Administrative Information.....	39
A.	Incurring Costs and Rejection of Applications.....	39
B.	Right to Amend or Withdraw RFP.....	39
C.	Financial and Administrative Requirements.....	39
D.	Authority to Bind TDH.....	39
E.	Right to Access Data.....	40
F.	Contracting with Sub-recipients and Vendors.....	40

	G. Protest of Application or Bid Denial.....	40
	H. RFP and Contract Amendment Authority.....	41
X.	Blank Forms and Instructions.....	42
	Form A-1 – Cover Page (Screening Application).....	43
	Form B-1 – Proposal Description (Screening Application)....	44
	Form C-1 – Proposed Budget Description (Screening Application).....	49
	Form A – Face Page – Application for Financial Assistance.....	50
	Form B – Application Checklist.....	52
	Form C – Program Contact Information.....	53
	Form D – Administrative Information.....	54
	Form E – Project Abstract.....	56
	Form F – Description of Target Population.....	58
	Form G – Organizational Experience.....	59
	Form H – Project Description and Work Plan.....	60
	Form I – Performance Measures.....	64
	Form J – Quality Assurance.....	65
	Form K – Dissemination Plan.....	66
	Form L – Budget Summary.....	67
	Form M – HUB Subcontracting Plan.....	86
	Form N – Nonprofit Board of Directors and Executive Director Assurances.....	91
	Appendix	
	Appendix A.....	92
	Appendix B.....	97
	Appendix C.....	99
	Appendix D.....	101
	Appendix E.....	102
	Appendix F.....	103
	Appendix G.....	104

I. INTRODUCTION

The Texas Department of Health (TDH) announces the expected availability of State General Revenue funding to provide grants for three goals that are referred to as “Parts.”

- Part I. Grants for Developing and Demonstrating Cost-Effective Prevention and Intervention Strategies for Improving Health Outcomes
- Part II. Grants to Local Communities to Address Disparities in Health in Minority Populations
- Part III. Grants to Local Communities for Essential Public Health Services

Grants are limited and will be awarded on a competitive basis.

This Request for Proposal (RFP) contains the requirements that applicants must meet to be considered for funding. Applicants who wish to be considered for TDH Public Health Improvement Grants are required to submit a screening application as the first phase of the application process. Applicants may **ONLY** submit a full application, if invited after the review of the screening application. **Applicants who submit the full application in place of the screening application may be disqualified.** Both the screening application and the full application must be submitted in accordance with the instructions contained in this RFP.

The responses to this RFP must be arranged in the order described in **Sections VI, B, Screening Application Content and Section VII, B, Full Application Content, and**

- ✓ Contain all required information, forms and signatures,
- ✓ Be written clearly and to the point, and
- ✓ Address the requirements outlined in the enclosed RFP.

Other sections within the RFP contain additional instructions pertaining to unique program requirements set forth in legislation or rules. **Applications that do not comply with the instructions in this RFP may result in disqualification without further consideration.**

IMPORTANT: PLEASE READ THIS RFP COMPLETELY BEFORE PREPARING THE SCREENING APPLICATION AND FULL APPLICATION.

II. BACKGROUND, LEGAL AUTHORITY AND PURPOSE

The TDH Public Health Improvement Grants, originally named the TDH Innovation Grants, were created in 1999 by the 76th Texas Legislature (HB 1676). The Legislature determined that a significant portion of funds received by the State of Texas from the tobacco settlement should be appropriated to certain permanent funds. One of those permanent funds, the Permanent Fund for Children and Public Health, was established for “certain public health purposes” at an amount of \$100 million. The interest from the fund is appropriated to TDH to accomplish the goals of the fund. TDH anticipates that the Texas Legislature will appropriate the interest for the next biennium (September 1, 2003 through August 31, 2005), but will not be able to confirm the funding until the end of the 78th legislative session.

The legal authority for the grants is Government Code, §403.1055, relating to the Permanent Fund for Children and Public Health, and the Health and Safety Code, §121.0065, relating to Grants for Essential Public Health Services.

The intent of the TDH Public Health Improvement Grants is to improve the capacity of communities to provide essential public health services (**see Appendix B**) that will improve public health outcomes using strategies that can be replicated in many places in Texas. To the maximum extent possible, the grants are intended to strengthen public health infrastructure in Texas by developing and demonstrating best practices or successful models for providing essential public health services. **No funds from the grants will be authorized to pay for direct health care services.**

TDH maintains and updates an Internet web site with information regarding this grant program and recommends you visit the site at:

<http://www.tdh.state.tx.us/phimprovement>

The web site contains:

- Rules for the grant program;
- FY2004 RFP;
- Q & A Document for FY2004 RFP;
- FY2004 Applicant Conference information (proposed for applicants who are invited to submit a full application only);
- List of the Essential Public Health Services;
- Text of HB1444 and HB1676, 76th Legislature, authorizing the grant program;
- Report of and other documents related to HCR 44 (75th Legislature) workgroup which studied local public health issues; and
- HB1444 Report (December 2000);

III. FUNDING

Funding may vary and is subject to change for each budget period.

- A.** Approximately \$5,500,000 is expected to be available to fund projects for all three parts. TDH reserves the right to allocate approximately 1/3 (one-third), but no less than 1/4 (one-fourth) of total funds to each part. However, if the funds for a part are not completely expended or allocated, TDH will have the authority to redistribute funds among the other two parts.
- B.** The rules governing the Public Health Improvement Grants specify that awardees may apply for continuation funding for one additional funding cycle up to a total of two cycles per project. The criteria the TDH will consider for awarding continuation funding include the grant recipient's accomplishments, progress towards or completion of stated goals and objectives, compliance with current contract requirements, as well as the proposal's plan to conduct additional data analysis or evaluation to enhance the impact of the project, and progress towards building community capacity or development of alternate funding to continue to address the public health issue within the target population.

Current FY2002 Grantees who wish to apply for continuation funding must submit Screening Applications and Full Applications in accordance with instructions in this RFP. Current FY2002 Grantees seeking continuation funding will compete with all other applicants for available funds.

- C.** Funds may not be used to supplant local or State funds.
- D.** The specific dollar amount to be awarded to each applicant will depend upon the merit and scope of the proposed project.
- E.** Any single grantee may be awarded multiple contracts but may only receive a maximum of \$1,000,000 for the 24-month budget period.
- F.** TDH intends to fund approximately 20 projects, however the number of projects funded will depend on the amount of available funds.
- G.** Grants made under Part III will be allocated in such a way so that the total amount of funds available is equally divided between services for rural and urban areas of the state.
- H.** A rural area is a county that had a population in the most recent decennial census of 150,000 or less, or that part of a county with a population of greater than 150,000 that is

not delineated as urbanized by the United States Census Bureau. An urban area is a county or part of a county that is not a rural area.

Note that the determining factor in deciding whether a grant is for an urban or rural area is whether an urban or rural area is **receiving the services**. For example, a grantee may be located in an urban area but may be proposing to serve a rural area. In this example, the grant would be considered a rural grant. **If a project serves an urban and a rural area, the applicant must specify the percentage of services that will be provided in each area.**

IV. APPLICATION OVERVIEW

- A. Grant Purpose** – The purpose of the grants is to improve or strengthen public health infrastructure in Texas. These grant funds are available for any project that builds capacity within the targeted population to provide essential public health services (**see Appendix B**). Proposals must develop or implement an essential public health service to address a public health issue and meet the specific requirements of the “part” for which the applicant has applied.
- B. Screening Application** - The application process will include two phases. The first application phase is the *Screening Application* that requires applicants to provide a brief explanation of the key components and funding requirements of their proposal. Applicants must submit their Screening Application on the forms provided in this RFP in order to be considered for funding. Screening Applications will be reviewed and scored based on responses to required information (**see Section VI, B, Screening Application Content**). A percentage of qualifying applicants will be invited to submit a *Full Application* based on receiving the highest scores under each part and the projected number of applications needed to provide an adequate application pool for funding under each part.
- C. Full Application** – The second application phase is the *Full Application* that requires a complete detailed description of the proposal and budget. Applicants must submit proposals utilizing the required forms provided in this RFP and meet all requirements outlined in this RFP to be considered for funding. Full Applications will be reviewed and scored based on responses to required information and the proposal’s ability to address the key components outlined in the RFP. (**See Section VII, B, Full Application Content**)
- D. Proposal Categories** – Listed below are brief descriptions of the categories for which applicants may submit proposals. If applying for either the Small Rural Project or one of

the TDH priority initiatives, applicants may apply under Part I, II **or** III so long as they are eligible for receiving funds under that part and their proposal meets the specific requirements for that part. Applicants must address both the specific project objectives as well as the general objectives for the part for which they apply, both of which are described in this RFP. **(see Section IV, E, Proposal Descriptions and Requirements.)**

1. **Small Rural Project** – Proposals are requested to address public health needs in small rural areas with populations of 50,000 or less. Applicants may submit proposals under any part for which they are eligible and must meet the guidelines outlined in the RFP. Proposals received relating to this project will compete for funding against similar proposals within the same TDH regional geographic area. **(see Section IV, E, 1, Small Rural Projects)**
2. **TDH Priority Initiatives** – Proposals are requested for projects relating to TDH priority initiatives **(see Section IV, E, 2, TDH Priority Initiatives)**. Applicants may submit proposals under any part for which they are eligible. Applications that meet the guidelines outlined in this RFP relating to these topics will receive preference points. **(see Section VI, D, 3 Screening Application Review Process, and Section VII, E, 3 Full Application Review Process)** Applicants must designate in their proposal which part and priority initiative their project addresses.
3. **General Proposals** – Applicants may submit a proposal that does not address one of the specific topics outlined above, but addresses a public health issue, develops and/or demonstrates an essential public health service(s), and meets the general guidelines of the part for which the applicant is applying **(see Section IV, E, 3, General Proposals)**.

E. Proposal Descriptions and Requirements

1. Small Rural Projects

Approximately \$400,000 will be designated to fund eight **Small Rural Projects**, one in each of the eight TDH regional geographic areas. To qualify as a Small Rural Project, the proposed activities must serve a rural area with a population of 50,000 or less. Applicant eligibility is determined by the part for which the applicant is applying. **(see Section V, A, Eligible Applicants)**. Collaborations between public health organizations, universities, non-profit organizations and the eligible community are encouraged. Eligible communities are also encouraged to collaborate with neighboring eligible communities for developing and submitting proposals so long as their combined populations do not total more than the 50,000 limit. Proposals submitted as a Small Rural Project may seek funding under Part I, Part II, or Part III, and

must meet the requirements for the part. Applicants must designate in the proposal the part for which they are applying. These grants will be no higher than \$50,000 each, must serve a rural population of 50,000 or less and must address **one** of the objectives listed below.

- **Objective 1: Conduct a community public health assessment and prioritize the public health concerns identified by the assessment.**

Activities under this objective would include creating and/or convening an advisory committee or board to:

- Oversee the project;
- Oversee a community public health assessment such as the Behavioral Risk Factor Surveillance Survey (BRFSS) to identify significant health risks in the community;
- Develop an effective plan to disseminate the findings of the assessment to community leaders, organizations and the public; and
- Facilitate forums within the community to identify priority public health issues.

- **Objective 2: Develop a community plan to address public health issues identified by the community.**

Activities under this objective would include convening an existing or creating a new local board of health or a community health advisory committee to:

- Oversee the project;
- Facilitate forums within the community to identify priority public health issues based on findings from a current community public health assessment (if the community has already completed this activity, the applicant should describe the methodology and community participation used to identify the priority public health issue, and the public health priority(ies) identified through this process.);
- Develop a community supported plan to address the priority public health issue(s). The plan must include short-term goals and activities (implementable within the grant funding period) and long-term goals and activities (implementable if required resources are obtained past the grant funding period.); and
- Oversee the implementation and completion of short-term goals and activities outlined in the plan.

- **Objective 3: Develop a plan for establishing a public health presence within**

the community.

Activities under this objective would include convening an existing or creating a new local board of health or local public health advisory committee to:

- Oversee the project;
- Develop a plan for creating a public health entity within the community that:
 - Specifies the role and relationship of the local board of health or advisory committee with the proposed public health entity;
 - Outlines the primary roles and functions of the proposed public health entity based on a recent community public health assessment;
 - Outlines an organizational structure for the proposed public health entity within the local governmental entity;
 - Includes a cost analysis of the proposed public health entity regarding appropriate staffing and resources; and
 - Includes strategies for obtaining the required resources for supporting the public health entity within the community.

2. TDH Priority Initiatives – TDH has outlined the following projects relating to TDH priority initiatives for which applicants may submit a proposal. Proposals addressing one of the following projects may be submitted under Part I, II, or III, must designate the TDH priority initiative and part for which they are applying, and must meet all guidelines and requirements outlined under the TDH priority initiative as well as the part for which the applicant is applying. Proposals that meet the guidelines and requirements for one of the TDH priority initiatives listed below will receive preference points (**see Section VI, D, 3 Screening Application Review Process, and Section VII, E, 3 Full Application Review Process**) Applicant eligibility is determined by the part for which the applicant is applying (**see Section V, A, Eligible Applicants**). Listed below are the priority initiatives for which TDH is requested proposals.

Enhancement of the Disease Reporting System – Proposals are requested to develop and implement a plan for improving the disease reporting system within a community. Applicant eligibility is determined by the part for which the applicant is applying. (**see Section V, A, Eligible Applicants**). The proposal should include the creation of a steering committee comprised of key health providers and stakeholders in the community to oversee the project. TDH anticipates that few, if any, of these grants will be higher than \$350,000 or lower than \$25,000. Project requirements include the following:

- Identifying key providers and stakeholders who should participate in planning and

- implementing the project, and the roles and responsibilities of each participant;
- Conducting an assessment of the gaps/barriers in the community's disease reporting system, (*Applicants must explain how this activity is being coordinated with disease reporting assessment activities conducted under the TDH Public Health Preparedness grant contracts within the targeted community*);
- Developing a plan for addressing the gaps/barriers to disease reporting identified in the assessment;
- Describing how the project will enhance the current disease reporting system
- Implementing the plan; and
- Evaluating the performance of the enhanced disease reporting system.

Promotion of Healthy Eating and Regular Physical Activity – Proposals are requested to pilot and evaluate an intervention to promote healthy eating and/or regular physical activity based on previous or current research. Applicant eligibility is determined by the part for which the applicant is applying. (**see Section V, A, Eligible Applicants**). TDH anticipates that few, if any, of these grants will be higher than \$350,000 or lower than \$25,000. Project requirements include the following:

- Identifying research that supports the effectiveness of the intervention (**see Appendix C for resources to identify research based interventions relating to this topic**);
- Describing the key community leaders and stakeholders (advocacy groups, non-profit organizations, such as the local American Heart or Lung Associations, School Districts, local business or corporations, etc.) who will participate in the project activities, and their role and or responsibility in meeting the objectives of the project;
- Identifying the target population, i.e., school, business or organization, or community, in which the intervention will be piloted;
- Developing a plan to collect and analyze data to determine the impacts and overall effectiveness of the intervention; and
- Disseminating the results of the pilot to the target community to facilitate potential changes regarding policies and/or procedures needed to sustain project activities within the targeted population.

Improving Childhood or Adult Vaccine Coverage Levels – Proposals are requested to pilot and evaluate an intervention to improve childhood or adult vaccine coverage levels based on previous or current research. Applicant eligibility is determined by the part for which the applicant is applying. (**see Section V, A, Eligible Applicants**). TDH anticipates that few, if any, of these grants will be higher than

\$350,000 or lower than \$25,000. Project requirements include the following:

- Identifying research that supports the effectiveness of the intervention (**see Appendix D for resources to identify research based interventions relating to this topic**);
- Describing the providers and key stakeholders (advocacy groups, non-profit organizations such as the County Medical Society, etc) who will participate in the project activities, and their role and or responsibility in meeting the objectives of the project;
- Identifying the target population in which the intervention will be piloted;
- Developing a plan to collect and analyze data to determine the impacts and overall effectiveness of the intervention; and
- Disseminating the results of the pilot to the target community to facilitate potential changes regarding policies and/or procedures needed to sustain project activities within the targeted population.

- 3. General Proposals** - Listed below are the general guidelines and requirements for the three parts under which applicants may submit any proposal that addresses a public health issue and develops or demonstrates an essential public health service(s). Applicant eligibility is determined by the part for which the applicant is applying. (**see Section V, A, Eligible Applicants**). Preference points will be awarded for **specific project components** if the criteria outlined in this RFP for preference points are met (**see Section VI, D, 3 Screening Application Review Process, and Section VII, E, 3 Full Application Review Process**).

Part I. Grants for Developing and Demonstrating Cost-Effective Prevention and Intervention Strategies for Improving Public Health Outcomes.

A total of approximately \$1,700,000 is available for grant proposals for developing and demonstrating cost-effective prevention and intervention strategies for improving public health outcomes. Within the limits set out in the rules governing these grants, projects must identify an essential public health service(s) that will be used to address any public health problem or issue within the State of Texas **or** may address designated topics listed under **Section IV, E, 2, TDH Priority Initiatives**. Proposals submitted for funding under Part I should focus on conducting or applying research to develop solutions to public health needs in Texas. Applicants may submit a proposal addressing **one** of the following objectives.

- **Objective 1:** Conducting a study of a public health issue to develop an effective

intervention for addressing the public health issue in Texas communities. The proposal must include the following:

- A description of the evidence identifying the topic as a public health issue;
 - A description of the target population affected by the public health issue;
 - A plan for conducting research to identify the factors that impact or cause the public health issue among the affected population;
 - A description of the data collection and analysis methodology to:
 - Support the findings of the research and proposed intervention; and
 - Determine the effectiveness of the proposed intervention; and
 - A recommended intervention and plan for implementing the intervention within a Texas community.
-
- **Objective 2:** Piloting or testing an intervention relating to a public health issue developed through existing research to determine its effectiveness in addressing the public health issue in a Texas community. **Proposals that test or pilot a public health intervention will be awarded preference points (see Section VI, D, 3 Screening Application Review Process and Section VII, E, 3 Full Application Review Process).** The proposal must include the following:
 - Information regarding the research from which the intervention was developed, including the name of the individual or organization conducting the research, the date the research was conducted, the evidence or findings on which the intervention was based, and a description of the target community on which the research was conducted;
 - A description of the public health issue and the intervention to be piloted;
 - A description of the target population in which the intervention will be piloted;
 - A description of key partners or stakeholders that will be included in piloting the intervention and their roles and responsibilities;
 - A description of the data collection and analysis methodology for evaluating the effectiveness of the intervention;
 - Recommendations regarding how the intervention, if successful, can be implemented in other areas of Texas.

TDH anticipates that few, if any, of these grants will be higher than \$350,000 or lower than \$25,000.

Part II. Grants to Local Communities to Address Disparities in Health in Minority Populations

A total of approximately \$1,700,000 is available for grant proposals under Part II for addressing disparities in health in minority populations. Within the limits set out in the rules governing these grants (see www.tdh.state.tx.us/phimprovement for grant rules), projects must identify the essential public health service(s) to be used to address an identified health disparity among a minority population within the State of Texas **or** may address designated topics listed under **Section IV, E, 2, TDH Priority Initiatives** which contribute to health disparities in minority populations. Projects should be carried out in parts of Texas, where evidence of health disparities among minority populations can be demonstrated.

Minority populations are African-Americans, American Indians, Asians, Hispanics, and other populations in Texas for which a health disparity can be demonstrated by the applicant. Applicants may address subgroups within these classifications (for example, Korean-Americans, recent immigrants versus second-generation Texans), as appropriate.

Proposals must include the following:

- Identification of a:
 - specific geographic area, community or population within a community where health status indicators demonstrate that health disparities exist; or
 - communities or work places where living or working conditions create health hazards directly related to an already existing health disparity;
- A description of the health disparity and its impact on the targeted community;
- Identification of all factors that cause or sustain the identified health disparity in the targeted population;
- Documentation which illustrates how each factor impacts the population, including but not limited to, socioeconomic factors, risk behaviors, cultural mores, attitudes toward prevention, and genetic susceptibility;
- A description of the methodology used for identifying the factor(s) that will be addressed in the project;
- Development of intervention/prevention strategies to reduce the health disparity in the targeted population;
- A list of specific activities to be conducted and how they will be measured against the health status indicators; and
- A plan for implementing the project activities with timelines for completing each of the objectives, and for evaluating the effectiveness of the activities and project outcomes.

TDH anticipates that few, if any, of these grants will be higher than \$350,000 or lower than \$25,000.

Part III. Grants to Local Communities for the Provision of Essential Public Health Services

A total of approximately \$1,700,000 is available for grant proposals under Part III to enhance essential public health services (EPHS) (**see Appendix B**) in Texas communities. Proposals should outline strategies for developing or demonstrating effective public health practices or models that will strengthen the public health infrastructure. Within the limits set out in the rules governing these grants, projects may address any public health issue **or** one of the designated priorities listed under **Section IV, E, 2, TDH Priority Initiatives**. Projects should be written to improve the capacity of a community to provide one or more essential public health services. The proposal must include the following:

- Identification of a priority community health issue and the EPHS(s) that will be used to address the issue;
- Evidence of the public health issue in the population to be served such as findings/results of a public health assessment or data from the Texas Strategic Health Status Indicators;
- A description of the research that supports the type of intervention or EPHS(s) that will be used to address the public health issue;
- A description of the intervention that will be implement to address the public health issue; and
- A description of the data collection and analysis methodology to determine the effectiveness of the intervention that includes the standards by which the essential public health service will be measured.

TDH anticipates that few, if any, of these grants will be higher than \$350,000 or lower than \$25,000.

4. Proposals Requesting Continuation Funding for FY2002 Grantees

Current FY 2002 Grantees who are eligible to receive an additional cycle of funding for their currently funded project may submit a proposal in response to this RFP. FY2002 grantees must meet the guidelines set forth in this RFP, and will compete with all other applicants under the part for which they are applying. Proposals for continuation funding must outline the same goals, objectives, and activities as the previously funded project. However, proposals for continuation funding may be amended slightly to ensure that the proposal meets the FY2004 RFP guidelines and requirements for

continuation funding (**see Section III, B, Continuation Funding**). Continuation funding will only be awarded under the same part of the grant that originally funded the project.

TDH anticipates that few, if any, of these grants will be higher than \$350,000 or lower than \$25,000.

V. GENERAL REQUIREMENTS

A. Eligible Applicants

Eligible applicants include:

Part I: Any person or other entity, public or private

Part II: Any county, municipality, public health district, or other political subdivision, including hospital districts, or local nonprofit organization in local communities within Texas

Part III: Any county, municipality, public health district, or other political subdivision, including hospital districts, in Texas

Applicants may submit multiple proposals and must designate under which part the proposal should be considered for funding. However, an applicant may not be funded under multiple parts for a single proposal.

If an applicant is currently debarred, suspended, or otherwise excluded or ineligible for participation in Federal or State assistance programs, the applicant is ineligible to apply for funds under this RFP.

B. Grant Period

TDH expects that the grants will begin on or about September 1, 2003 for a 24-month

period and end August 31, 2005. Funding for this RFP is contingent on appropriation of interest from the Permanent Fund for Children and Public Health to TDH. At the time of the release of this RFP, the Texas Legislature has not yet voted on the appropriation for this budget period.

C. Schedule of Events for Application Processes

The following schedule is subject to revision at the discretion of TDH. Changes will be posted on the web site and published in the *Texas Register*.

1. Issuance of RFP 10/03/02
2. Deadline for Submission of Screening Application 12/03/02
3. Written Invitation to Submit Full Application 01/20/03
4. Deadline for Submission of Full Application 03/20/03
5. Written Notification to Selected and
Non-selected Applicants 05/15/03
7. Contract Negotiation, Development & Execution 05/15/03- 06/15/03
8. Estimated Contract Begin Date 09/01/03

VI. SCREENING APPLICATION OVERVIEW

A. Screening Application Schedule of Events

1. Issuance of RFP 10/03/02
2. Deadline for Submission of Screening Application 12/03/02
3. Written Invitation to Submit Full Application 01/20/03

B. SCREENING APPLICATION CONTENT

Screening Applications must be submitted on the forms provided in **Section X, Blank Forms and Instructions**, or posted on the TDH web site at (<http://www.tdh.state.tx.us/phimprovement>). The Screening Application template includes a single cover page, a proposal description with a five-page limitation, and a one-page budget summary. If the proposal description exceeds the specified page length, only the first five pages of the proposal description plus the budget summary will be considered. No appendices, booklets or other documents accompanying the Screening Application will be considered. Screening Applications that omit any of the required information will be disqualified without review. **Applicants who submit the**

Full Application in place of the Screening Application may be disqualified.

Please avoid jargon and spell out any abbreviations upon first use. Information to be included in the Screening Application includes:

- 1. Cover Page** – This form **(Form A-1)** requests basic information about the applicant and the project, including the signature of the authorized representative. The cover page of the screening application must be completed in its entirety. The cover page will identify the part for which the applicant is applying, the name of the project, specify if the project relates to a TDH priority initiative, and whether the service area is a rural or urban population.
- 2. Proposal Description** The applicant should briefly describe the project by completing **(Form B-1)**. Listed below are the specific areas that should be addressed.
 - **Project Summary** - The project summary should include a description of the following information
 - The public health issue to be addressed, and, if required, the research on which the project was based;
 - The overall goal(s) of the project;
 - The demographic characteristics of the target population;
 - The EPHS(s) that will be developed/demonstrated to address the public health issue;
 - The project activities; and
 - How the project addresses the specific goals of the part for which the applicant is applying.
 - **Performance Measures** – The applicant must describe the performance measure indicators that are proposed for evaluation of their project. The description must include the:
 - Objective(s) and the strategies used to determine if they have been achieved;
 - Time lines and deliverables for measuring progress toward meeting the objective(s);
 - A description of data collection and analysis methodology that will be used to determine the effectiveness of project activities and status toward meeting project objectives; and
 - The standard for evaluating project outcomes.
 - **Collaboration** – The applicant must include information on how the applicant

plans to collaborate or has collaborated with local public health entities, key policy makers or stakeholders in the target population on project activities. The application should include the following information:

- A plan for discussing the proposal with the public health entity responsible for providing public health services to the target population, i.e., regional or local health department, including the proposed time line for holding the discussion; and
 - A list of key policy makers, stakeholders, and advocacy organizations that will be approached to collaborate on the project, including their roles and responsibilities, and how their participation will impact the project.
- **Strengthening the Public Health Infrastructure** – The applicant should describe how the project will increase capacity to provide the EPHS(s) in the target population or community to continue to address the public health issue after the project has been completed. Examples of building capacity to provide essential public health services include the following:
- Training individuals within the targeted population or community to provide Essential Public Health Services;
 - Developing a Local Board of Health, Public Health Advisory Committee, or “system” to monitor/address the public health issue;
 - Creation of local policies, procedures or ordinances to support the intervention/prevention activities;
 - Developing strategies for continued data collection after the project has been completed to enable the target population or community to measure intervention activities against national indicators such as Healthy People 2010; or
 - Creation of a community action group comprised of community leaders and advocates who will continue to address the public health issue after the project has been completed.
- **Justification for Continuation of Funding*** - Eligible FY2002 Grantees applying for continuation funding must provide the following information:
- A brief description of the progress toward meeting the goals and objectives of the currently funded grant;
 - A brief description of unforeseen barriers to completing the currently funded project, and the plan for addressing the barriers to complete the project if funded for an additional cycle of funding. The description must include the revised time lines and budget required for completing the project; and
 - A brief description of the proposed project enhancements relating to additional services or data collection and analysis, and how they will

improve the findings/results of the project.

*** Required For Current FY2002 Grantees who are applying for continuation funding only. NOTE: Proposals received from eligible FY2002 grantees applying for continuation funding will be reviewed based on the criteria specified in Section VI, D, Screening Application Review Process. Applicants submitting proposals under these circumstances are encouraged to review that portion of the RFP prior to submitting their application.**

- 3. Proposed Budget Summary** –The applicant should include a brief summary of the proposed budget and funding needs for the project using **Form C-1** that is included in this RFP and posted on the TDH website at www.tdh.state.tx.us/phimprovement. The applicant must complete the form in its entirety and include a brief explanation of the funds required in each budget category.

C. SCREENING APPLICATION SUBMISSION REQUIREMENTS

- 1. Submission Due Date**
 - Screening Applications (**original and five copies**) must be received no later than **5:00 P.M. C.S.T. on December 3, 2002. SCREENING APPLICATIONS RECEIVED AFTER THE APPLICATION DEADLINE WILL NOT BE CONSIDERED.**
 - The original Screening Application and five copies must be submitted to:

Ms. Suzanne Sparks
Office of Public Health Practice - T-608
Texas Department of Health
1100 West 49th Street
Austin, Texas 78756-3199

- Screening Applications may be mailed or hand-delivered to the TDH program address above on or before the application deadline. **TDH will not accept Screening Applications by facsimile transmission or E-mail.**
- Applicants wishing to hand-deliver the Screening Application must request a receipt at the time of delivery to verify that the Screening Application was received by the Office of Public Health Practice on or before the deadline.
- Screening Applications submitted by mail will be considered as meeting the deadline if the application is:

- Received on or before **5:00 P.M., C.S.T., December 3, 2002**, or
- Postmarked on or before the above due date. (*Applicants must request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier service or the U.S. Postal Service. Private metered postmarks will not be acceptable as proof of postmark.*)
- Screening Applications will be reviewed according to the criteria below. To maximize fairness for all applications during review, TDH staff may only confirm receipt of an application and are not permitted to discuss the application or its review during the review process. All applications will remain with TDH and will not be returned to the applicant.

D. SCREENING APPLICATION REVIEW PROCESS

1. **Preliminary Review** – Screening Applications will receive a preliminary review to determine if all requested information is complete and adheres to the following requirements specified in the RFP:
 - The Screening Application was received by the due date;
 - The original and all required copies were submitted;
 - The Screening Application was submitted on the required forms included in **Section X, Blank Forms and Instructions**, and posted on the TDH website at (www.state.tx.us/phimprovement);
 - The Screening Application contains the proper signature;
 - The applicant meets the eligibility criteria specified in **Section V, A, Eligible Applicants**;
 - The applicant has specified the part for which they are applying; and
 - Part III applicants have specified whether the area of service is rural or urban. If the application specifies that the service area is both rural and urban, the percentage of service each area will be receiving is specified.

Screening Applications that do not meet the requirements listed above may not be considered for review at the discretion of TDH.

2. **Review Committee** - TDH will establish a review committee of qualified persons to evaluate the appropriateness and quality of the Screening Applications. The Office of Public Health Practice will develop a standardized review tool for use by the review committee to evaluate proposals and assign scores based on standardized award criteria. Reviewers shall not evaluate any screening applications for which they have a conflict of interest. No reviewer will be a current applicant for a grant on which they would be making recommendations.

3. **Review Criteria** – Screening Applications will be awarded scores based on how well the proposal addressed the requirements for the key components outlined in this RFP. Listed below are the key components and the criteria that will be used for awarding points.
- **Cover Page** (10 points) – The Cover Page will be evaluated for a range of points based on the following criteria:
 - The cover page provides all required information.
 - **Project Summary** (70 points) – The Project Summary will be evaluated for a range of points based on the following criteria:
 - The proposal identifies the public health issue, the research on which the project was based (if required by the RFP), the target population, the essential public health service(s) that will be developed/demonstrated, and the goal(s) of the project.
 - **Performance Measures** (60 points) – Performance Measures will be evaluated for a range of points based on the following criteria:
 - Project objectives are measurable and include time lines and deliverables.
 - **Collaboration** (30 points) – Project Collaboration will be evaluated for a range of points based on the following criteria:
 - Application identifies key community partners and local health entities that have been or will be involved in planning and/or implementing the project.
 - **Strengthening the Public Health Infrastructure** (50 points) – The proposal's ability to demonstrate that it will strengthen the public health infrastructure will be evaluated for a range of points based on the following criteria:
 - Proposal demonstrates how the project will increase the target population's ability to address the public health issue after the project has been completed.
 - **Proposed Budget Summary** (5 points) – The proposed budget summary will be evaluated for a range of points based on the following criteria:
 - The budget summary provides justification for project expenditures.
 - **Request for Continuation Funding** (15 points) – Proposals submitted by eligible FY2002 Grantees who are requesting continuation funding will be evaluated for a range of points based on the following criteria:
 - An explanation of how the additional or enhanced project activities will

improve project outcomes.

- **Preference Points** (15 points) – Fifteen additional points may be earned for each of the following criteria:
 - Proposal addresses one of the TDH Priority Initiatives;
 - Proposal is requesting funding under Part I and will test or pilot a public health intervention;
 - Proposal describes how a community partner(s) or a local public health entity have participated in planning the proposal, or will participate in implementing the proposal; and
 - Proposal includes performance measures that will measure project activities and outcomes.

E. SCREENING APPLICATION SELECTION PROCESS

A percentage of qualified applicants will be invited to submit a Full Application based on the results of the above-described review process and the projected number of applications needed to provide an adequate application pool for funding under each part. **FULL APPLICATIONS WILL BE ACCEPTED BY INVITATION ONLY.**

F. PROJECT TECHNICAL ASSISTANCE

Applicants are permitted and encouraged to contact TDH program and regional staff during the preparation of their proposal to seek input on:

- Project design and evaluation methodologies;
- Target population and community selection; and
- Potential collaboration and/or partners for the project.

G. SCREENING APPLICATION QUESTION AND ANSWER DOCUMENT

Written inquiries concerning the Screening Application will be accepted and answered until 5:00 P.M., C.S.T. on November 8, 2002. Responses to inquiries of a general nature will be documented in the Questions and Answers (Q&A) Document and posted on the web site (<http://www.tdh.state.tx.us/phimprovement>) and updated regularly. Responses to inquiries of a specific nature will be provided only to the requestor. TDH will be the sole judge of whether an inquiry is of general or specific nature. Copies of the Q&A Document will be made available upon request.

VII.FULL APPLICATION OVERVIEW

A. FULL APPLICATION SCHEDULE OF EVENTS

- Issuance of RFP 10/03/02
- Written Invitation to Submit Full Application 01/20/03
- Deadline for Submission of Full Application 03/20/03
- Written Notification to Selected and
And Non-selected Applicants 05/15/03
- Contract Negotiation, Development & Execution 05/15/03 – 07/15/03
- Contract Begin Date 09/01/03

B. FULL APPLICATION CONTENT

THE FULL APPLICATION MUST BE ORGANIZED AND ARRANGED IN THE FOLLOWING ORDER.

1. Face Page - Application for Financial Assistance

Form A must be completed to provide basic information about the applicant and the project, including an original signature of the authorized representative. The face page must be completed in its entirety, including the name and type of entity applying, the county(ies) to be served by the project, amount of funds requested, projected expenditures, and project contact names and information.

2. Application Checklist

The Application Checklist must be completed utilizing **Form B**, and submitted with the application to ensure all of the information requested has been included. The Application Checklist immediately follows the Face Page.

3. Table of Contents

The proposal must include a Table of Contents that identifies each Section and related areas as outlined in this RFP. The Table of Contents must follow the order specified for the Full Application Content and include page numbers of each section.

4. Contact Person Information

Contact information for the applicant must be completed on **Form C**, to provide information to TDH about the appropriate contact persons in the applicant's

organization who are responsible for and have decision authority over the proposed project. This information will be used for communicating with the applicant during the application process and the project period if the proposal is selected for funding.

- 5. Administrative Information.** The Administrative Information, **Form D**, requests information regarding the identification and contract history on the applicant, executive management, project management, governing board members and/or principal officers. Attach all required supplemental documentation behind this form.

6. Project Abstract*-limited to two (2) pages*

Proposals must include a Project Abstract that provides identifying information and an executive summary of the project, utilizing **Form E**. The abstract must identify the public health issue, the research on which the project is based (if required by the RFP), project goal(s), and describe how the project will increase the target population's ability to address the public health issue.

7. Description of Target Population – *limited to two (2) pages*

The description must be completed on **Form F**, define the target population and describe how the population is impacted by the public health issue. The description should include:

- The number of people served by the project and a breakdown by age, gender and ethnicity.
- A general description of the target population's health status relating to the public health issue identified,
- A description of gaps and potential barriers of the target population to receiving the EPHS(s) that address the public health issue in the target population.

The applicant is encouraged to utilize existing data sources and assessments, such as the TDH County Fact Sheets or Texas Strategic Health Status Indicators, when completing this portion of the application. Note that the community/target population being addressed by the application may be as large as the entire state of Texas or as small as is reasonable for the proposed project.

8. Organizational Experience – *limited to two (2) pages*

Using **Form G**, the applicant must provide a narrative description that provides information on the knowledge, expertise, and experience of the applicant in

managing projects similar to the proposed project. The description must include:

- The name and purpose or mission statement of the applicant organization;
- A brief description of a project conducted by the applicant that includes the following:
 - A brief description of the project and issue that was addressed,
 - A brief description of the target population served,
 - A brief description of how the applicant involved key stakeholders and/or community organizations to plan and participate in the project,
 - A brief description of how the project's goals/objectives increased the target population's ability to address the issue, and
 - A brief description of the methodology used for evaluating project activities and outcomes.
- A brief description of the experience of the proposed Project Manager in managing projects similar to the proposed project.

9. Project Description and Work Plan

Applicants must submit a comprehensive Project Description and Work Plan utilizing **Form H**. To assist reviewers in evaluating applications, the plan must include a clearly written explanation or response to each topic area listed below. The Project Description and Work Plan must be labeled according to each of the following topics:

- a. **Public Health Issue** - Briefly describe the public health issue, the research on which the project is based, and the evidence that defines the significance or scope of the public health issue.
- b. **Project Goals/Objectives**: List the project goal(s) and objective(s) for addressing the public health issue.
- c. **Essential Public Health Services** – List the EPHS(s) that will be developed or demonstrated to address the public health issue.
- d. **Project Activities** - List and describe the activities, time lines and deliverables that will be conducted to meet project the objective(s).
- e. **Collaboration** - Document the applicant's intent and ability to communicate and collaborate with local public health entities, community organizations and stakeholders that are key to the success of the project. The proposal should outline a plan to:

- Discuss the proposal with the local or regional health department responsible for providing public health services to the targeted population. The discussion should include:
 - A description of the project and target population;
 - The need and potential benefit of the proposal; and
 - An explanation of how the applicant will avoid duplicating existing services to the target population.
- Identify key partners and their roles and responsibilities relating to planning and implementing the project. Key community partners may include local public health entities, health care providers, consumers, businesses, educational institutions, governmental agencies, law enforcement agencies, non-profit advocacy groups, or religious institutions.

The proposal must include a Letter of Collaboration (**see sample in Appendix E**), to document that the local or regional public health entity and key partners have

- Been notified about the proposal and support the proposal, **or**
- Agreed to collaborate on the project by outlining their roles/responsibilities and proposed activities.

f. **Strengthening the Public Health Infrastructure** – The proposal should describe how the project will increase the capacity of the target population or community to continue to address the public health issue after the project has been completed. Examples of building capacity within the target population or community include:

- Training individuals within the targeted population or community to provide Essential Public Health Services;
- Developing a Local Board of Health or Public Health Advisory Committee or “system” to monitor/support the public health issue;
- Creation of local policies, procedures or ordinances to support the intervention/prevention activities;
- Developing strategies for data collection after the project has been completed to enable the target population or community to measure intervention activities against national indicators such as Healthy People 2010; and
- Creation of a community action group comprised of community leaders and advocates who will continue to address the public health issue after the project has been completed.

g. **Demonstration of a Strong Financial Commitment** - The proposal should describe the direct funding or significant in-kind contributions provided from the

applicant or project partners to conduct and/or sustain the project after the project has been completed. The description should include:

- How the applicant plans to draw on resources from other institutions, local entities, private donors, state agencies, federal grantors, or private foundations to support and sustain project activities;
- Existing resources of the applicant or project partners that can be used to support personnel, equipment and facility needs for the project; and/or
- Outline how the applicant will seek other funding to sustain project activities after the project has been completed.

h. **Project Cost Analysis** – The proposal should include a plan to analyze costs related to sustaining project activities after the project has been completed or replicating the project in other areas of Texas. At a minimum, the plan must include the minimum funding, staffing, equipment, supplies, and travel required to support the project.

i. **Project Objectives Relative to the Goal of the Part for Which the Applicant is Applying** – Proposals must describe how the project meets the overall goal of the part under which the applicant is requesting funds.

j. **Continuation Funding** - Eligible FY2002 Grantees applying for continuation funding must describe how project outcomes will be enhanced and/or provide added value to the public health infrastructure by providing the following information:

- A description of the progress toward meeting the goals and objectives of the currently awarded grant;
- A description of unforeseen barriers to completing the currently funded project, and the plan for addressing the barriers to complete the project if funded for an additional cycle of funding. The description must include the revised timelines and budget required for completing the project;
- A description of the proposed project enhancements relating to additional services or data collection and analysis, and how they will improve the findings/results of the project.

9. Performance Measures

Applicant agrees that in the event funding is awarded, performance measures will be used to assess, in part, the applicant's effectiveness in meeting the objectives for the project. Performance measures are defined as quantifiable measures that

are used to improve quality, increase accountability for dollars invested, and create credibility with internal and external partners.

The applicant must describe in detail the performance measures to be used by TDH to assess contractor performance and timeliness, and must describe the levels of performance for each measure and the quality of products/services to be developed/delivered. Applicants must use **Form I** found in this RFP and also available electronically on the Public Health Improvement website (www.tdh.state.tx.us.phimprovement) to document the performance measures. Performance measures must be submitted in this table format in the proposal. Specific information required in the template includes:

- The performance measures (Minimum of one (1) per quarter);
- A description of good, fair and poor performance for each measure;
- Date by which each performance measure will be completed; and
- The person responsible for each measure.

The proposed measures and levels of performance will be negotiated and agreed upon by the applicant and TDH, if the applicant is selected for funding.

10. Quality Assurance - *limited to two (2) pages*

The application must include a plan for ensuring quality assurance. The plan must be completed on **Form J** and include:

- A plan that describes how the applicant will ensure quality in every aspect of the program by conducting quality assurance activities in the following areas:
 - Project monitoring and/or performance reviews to determine status and completion of project activities, and success in meeting project goal(s) and objective(s);
 - Adherence to approved methodologies for data collection and analysis; and
 - Appropriate service delivery to culturally diverse populations.
- Identification of the individual who will have responsibility for ensuring that quality assurance activities are conducted during the project. Applicant should describe the individual's experience in quality assurance activities.

11. Dissemination Plan - *limited to two (2) pages*

The applicant must outline a plan for disseminating project information such as data, findings and/or results, evaluation methodologies, and recommendations to

key stakeholders and interested parties within Texas. The plan should be completed on **Form K** and include:

- A list of key stakeholders, i.e., community leaders or groups, advocacy groups, public health entities, etc., who would benefit from the project and use the findings to develop policies or initiatives regarding the public health issue;
- A description of the anticipated findings/results and the type of format that will be used to disseminate them;
- A list of annual conferences and/or meetings of the key stakeholders or public health entities that the applicant plans to present the project information (*Applicant should explain if project information will be disseminated after the end of the project term, and how this will be accomplished.*); and
- Notice of intent to publish the findings, if applicable, including the name of the journal or periodical to which the article will be submitted, and the proposed timeline (*Applicant must include a proposed date when the findings will be released to TDH for public health use. This information will be discussed and agreed upon during the negotiation process if the applicant is selected for funding.*).

C. FINANCIAL INFORMATION REQUIRED IN FULL APPLICATION

1. **Funding Information.** The Budget Summary form, included in **Section X, Blank Forms and Instructions**, requests information on funding from other non-TDH State of Texas agencies and projected federal expenditures. Letter(s) of good standing from other non-TDH state agency funding sources that validate the applicant's programmatic, administrative, and financial capability should be placed after this form. If the applicant is a state agency, local governmental or public health agency, or an institution of higher education, letters of good standing are not required.
2. **Budget.** All applicants must complete the budget summary form (**see Form L**) and the detailed budget category forms (**Forms L1 -L7**), which include space for a narrative justification for the budget request. Definitions of the cost categories and instructions for the forms are provided in **Section X, Blank Forms and Instructions**.

Note: The Public Health Improvement Grant will allow up to 10% of salary expenses for indirect cost. Funds will not be awarded to pay for rent, utilities, renovations or construction.

3. **Historically Underutilized Businesses (HUBs).** In accordance with Texas Government Code, Sections 2161.181-182, Health and Human Service (HHS) agencies shall make a good faith effort to assist HUBs in receiving awards issued by the state. The goal of this program is to promote full and equal business opportunity for all businesses in contracting with the state. It is the intent of TDH that *all* TDH contractors make a good faith effort to subcontract with HUBs during the performance of their contract and to report their HUB subcontract activity to TDH on a quarterly basis. “Subcontract” means a written third party contract between a prime contractor/grantee and another contractor for the performance of all or part of a contract.

Blank HUB forms (**Forms M1-M5**) are included in **Section X. Blank Forms and Instructions**. Please read the forms carefully. Completed HUB forms, where applicable, should be submitted with the application. All questions concerning HUBs and TDH’s HUB program should be directed to the TDH HUB Coordinator at 1-800-243-7487.

The HUB rules (1 Texas Administrative Code 111.11-111.24) may be obtained by contacting the TDH HUB Coordinator or by accessing the Texas Administrative Code on the Internet at <http://www.sos.state.tx.us/tac>.

4. **Nonprofit Board of Directors and Executive Director Assurances Form.** If the applicant is a nonprofit organization, this form (**Form N**) must be completed (state or other governmental agencies are not required to complete the form). The purpose of the form is to inform nonprofit board members and officers of the responsibilities and administrative oversight requirements of nonprofit applicants intending to or contracting with TDH.
5. **TDH Assurances and Certifications.** Assurances and Certifications (**Appendix A**) are required of all contractors by federal/state law and TDH policy. Signature on the Face Page (**Form A**) affirms that applicant is in compliance with the assurances and certifications contained in this RFP and acknowledges that continued compliance is a condition for the award of a contract.

TDH requires that all applicants complete these forms and include them with the application (e.g., assurances, certifications, administrative information, HUB forms, etc). The forms are available on the Public Health Improvement Grants web site (<http://www.tdh.state.tx.us/phimprovement>). Forms may be electronically reproduced, however, all forms must be identical to the original

forms provided.

D. FULL APPLICATION SUBMISSION REQUIREMENTS

Full applications (original and five copies) must be received no later than **5:00 P.M. C.S.T., March 20, 2003**.

The original Full Application and five copies must be submitted to:

Ms. Suzanne Sparks
Office of Public Health Practice - T-608
Texas Department of Health
1100 West 49th Street
Austin, Texas 78756-3199

TDH will not accept applications by facsimile transmission or E-mail.

Full applications may be mailed or hand-delivered to the TDH program address above, on or before the application deadline.

If a full application is hand-delivered, applicant should be sure to request a receipt at the time of delivery to verify that the application was received by the Office of Public Health Practice on or before the full application due date and time.

If a full application is mailed, it will be considered as meeting the deadline if it is:

- Received on or before **5:00 P.M., C.S.T., March 20, 2003**; or
- Postmarked on or before the due date. *(Applicants must request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier service or the U.S. Postal Service. Private metered postmarks will not be acceptable proof of postmark.)*

To facilitate review and processing of the Full Applications, each application must meet the following stylistic requirements:

- Application includes a Table of Contents;
- All pages are clearly and consecutively numbered, including all forms;
- An original proposal (unbound) and five copies are submitted;
- Application is typed by computer or typewriter;
- Application is single-spaced using 12-point font on 8 1/2" x 11" paper with 1"

- margins;
- Application is printed on one side only;
- Face page is signed in ink by an authorized official (copies need not bear an original signature); and
- Information is submitted on the blank forms provided in **section IX. Blank Forms and Instructions**. Electronic reproduction of the forms is acceptable.

Full Applications will be reviewed according to the criteria below. To maximize fairness for all applications during review, TDH staff may only confirm receipt of an application and are not permitted to discuss the application or its review during the review process. All applications will remain with TDH and will not be returned to the applicant.

There will be a preliminary screening of the full applications to determine that all requested information is complete and adheres to the following application requirements:

- The original proposal and all required copies were submitted on or before the due date;
- The Face Page includes an original signature of the authorized representative that certifies to the assurances;
- A checklist is attached and documents that the application is organized and arranged as described in **Section VII, B, Full Application Content**;
- The applicant meets the eligibility criteria in **Section V, A, Eligible Applicants**;
- In regards to Part III applicants, the application designates whether the service area is rural or urban. If both rural and urban, the percentage of services each area will be receiving is specified.

Full applications that do not meet the requirements of this RFP **may not** be considered for review at the discretion of TDH.

E. FULL APPLICATION REVIEW PROCESS

1. **Preliminary Review** – Full Applications will receive a preliminary review to determine if all requested information is complete and adheres to requirements outlined in **Section VII, D, Full Application Submission Requirements**.
2. **Review Committee** – TDH will establish a review committee of qualified persons

to evaluate the appropriateness and quality of the Full Applications. The Office of Public Health Practice will develop a standardized review tool for use by the review committee to evaluate proposals and assign scores based on standardized award criteria. Reviewers shall not evaluate Full Applications for which they have a conflict of interest. No reviewer will be a current applicant for a grant on which they would be making recommendations.

3. **Review Criteria**- Full Applications will be awarded scores based on how well the proposal addresses the requirements outlined in this RFP. Listed below are the key components and the criteria that will be used for awarding points.

- **Project Abstract** (15 points) – The abstract will be evaluated for a range of points based on the following criteria:
 - Abstract was submitted on the correct form;
 - Identifies the public health issue and project goal(s); and
 - Outlines how the project will increase the target population's ability to address the public health issue.
- **Description of Target Population** (30 points) – The description will be evaluated for a range of points based on the following criteria:
 - A definition of the target population with required breakdowns;
 - A description of the health status of the target population relating to the public health issue; and
 - A description of the factors relating to the public health issue that will be addressed by the project.
- **Organizational Experience** (30 points) – Organizational experience will be evaluated for a range of points based on the following criteria:
 - Applicant provides information regarding their knowledge, expertise and experience in managing projects similar to the proposed project.
- **Project Description and Work Plan** (75 points) – The work plan will be evaluated for a range of points based on the following criteria:
 - The work plan describes:
 - The public health issue, research on which the project is based, if required in the RFP, goal(s) and objectives, and project activities;
 - How the applicant will collaborate with community partners to increase the target population's ability to address the public health issue;
 - Project costs and additional support provided by the applicant or partners; and

- How the project meets the goals of the part for which the applicant is applying.
- **Performance Measures** (75 points) – the performance measures will be evaluated for a range of points based on the following criteria:
 - Performance measures are identified and submitted on the required form; and
 - Demonstrate progress toward the project goal and effectiveness toward addressing the public health issue.
- **Quality Assurance** (20 points) – The quality assurance plan will be evaluated for a range of points based on the following criteria:
 - Proposal outlines a plan for conducting quality assurance activities that ensures project is completed, time lines are met and deliverables are provided.
- **Dissemination Plan** (30 points) – the dissemination plan will be evaluated for a range of points based on the following criteria:
 - The findings or results of the project are provided to leaders and/or key stakeholders in the target population, public health entities and statewide advocacy groups.
- **Continuation Funding** (15 points) – Proposals submitted by eligible FY2002 grantees that are requesting continuation funding will be evaluated for a range of points based on the following criteria:
 - The plan for continuing the project demonstrates a benefit to public health in Texas.
- **Preference Points** (15 points) – Fifteen additional points may be earned for each of the following criteria:
 - Proposal addresses one of the TDH priority initiatives;
 - Proposal is requesting funding under Part I and will test or pilot a public health intervention;
 - Proposal describes how a community partner(s) or a local public health entity has participated in the planning of the proposal, or will participate in implementing the proposal; and
 - Proposal identifies additional funding or in-kind support totaling approximately 25% of the requested funding.

F. FULL APPLICATION SELECTION PROCESS

1. **Review Panel** – Following the review of the Full Applications by teams of qualified persons, TDH will establish a panel(s) of appropriate TDH employees and/or persons from outside TDH who will review the applications and other funding criteria, and make recommendations for awards. Panel members from outside TDH will receive no compensation or reimbursement for expenses. No panel member will be a current applicant for a grant on which the panel member would be making a recommendation.

2. **Review and Selection Process** – The following process will be used by the Review Panel to select the applications that will be recommended for awards.
 - Applications will be sorted based on the final score awarded by the review teams and the part designated;
 - The Review Panel will review and discuss the merits of the top scoring projects for each part;
 - The Review Panel will make recommendations for award based on the following criteria:
 - The project addresses the overall goal for the part designated;
 - The project demonstrates the ability to measure project activities and outcomes;
 - The project demonstrates that local public health entities, community organizations and/or key stakeholders have been involved in planning and implementing the project; and
 - The project demonstrates the ability to increase the target population's ability to address the public health issue after the project has been completed.
 - Other considerations for recommending applications for awards include:
 - Geographic representation of the project service area;
 - Number of people served in relationship to cost of project;
 - Number of similar topics being recommended for funding; and
 - Demonstration of significant direct or in-kind support from applicant or project partners.

3. Final Selection

The Review Panel will submit recommendations for awards to the Commissioner of Health. The recommendations will include the applicant's name, the specific goals or components of the project that should be funded, recommended funding amount, and any special instructions for negotiating a contract with the awardee.

The commissioner or his designee will make the final funding decision.

G. APPLICANT CONFERENCE

An applicant conference will be held to provide technical assistance to applicants invited to submit a Full Application. The conference will be held on **Friday, February 7, 2003 from 10:00 a.m. to 2:00 p.m.**, at The Texas Department of Health, 1100 West 49th St, Austin, Texas, Room K-100. Registration will be from 9:00 a.m. to 10:00 a.m. Interested applicants must reserve seats by faxing a request to the TDH, as outlined in the Applicant Conference Information posted on the web site at <http://www.tdh.state.tx.us/phimprovement>. Attendance or non-attendance at the applicant conference will have no effect on the evaluation of applications.

All questions during the conference must be written on index cards that will be handed out at the beginning of the conference. The cards will be collected throughout the conference. Answers to the questions will be provided during the conference as time permits, or posted on the TDH website identified above.

Questions may be answered at the conference, but no answer will be binding until it has been included in the Phase II "Questions and Answers" document.

H. FULL APPLICATION QUESTION AND ANSWER DOCUMENT

Written inquiries concerning the Full Application process of the RFP must be received no later than **5:00 P.M., C.S.T. on February 20, 2003**. Responses to inquiries of a general nature will be documented in the Questions and Answers (Q&A) Document and posted on the web site (<http://www.tdh.state.tx.us/phimprovement>) and updated regularly. Responses to inquiries of a specific nature will be provided only to the requestor. TDH will be the sole judge of whether an inquiry is of general or specific nature. The Q&A Document will be made available upon request.

VIII.CONTRACT NEGOTIATION

After the review and selection process is completed, each applicant whose application is selected for funding will receive written notification. This notice is an announcement of

selection, and the receipt of the notice is not legally binding until there is a fully executed contract. The final funding amount and the terms of the contract shall be determined through negotiations between TDH and the applicant(s). The specific Scope of Work will be developed from information contained in the RFP and the application. TDH reserves the right to adjust the funding allocation during the term of the contract, pursuant to the terms of the contract. Exceptions to any of the requirements in the RFP must be specifically noted and satisfactorily explained by the applicant in the application, and must be reviewed and approved by the Office of Public Health Practice as a condition for allowing those exceptions in the contract. The TDH Contract General Provisions are available on the TDH Grants Management Website at: <http://www.tdh.state.tx.us/grants/genprov/default.htm>.

The General Provisions will be revised and up-dated prior to September 1, 2003. The revised General Provisions will be included in any contract awarded under this RFP.

The Office of Public Health Practice will negotiate contracts within the framework of the program goals and the funds available. The applicants selected for contract awards may be asked to revise the data collection, usage or accessibility components; budgets; specific expenditures; timeframes; performance measures as well as the goals and objectives of their applications in order to achieve the program's goals within available funding limits and limitations of the rules governing these grants.

TDH funds for this grant program are dependent on the availability of the appropriations. Because of limitations on the timing of the obligation or expenditure of state monies, it may be necessary for TDH to negotiate different schedules for the actual transfer of the monies to each successful applicant or to place limits on the timing of the expenditures of the grants by each successful applicant. This will be part of the contract negotiation process.

The applicant will submit written revisions reflecting negotiated changes. Once the contract negotiation process is complete, TDH will initiate the development of a contract.

Each applicant not selected for a contract will also receive a timely written notification that the application will not be funded.

IX. TDH ADMINISTRATIVE INFORMATION

A. Incurring Costs and Rejection of Applications

Any costs incurred in the preparation of the application will be borne by the applicant and are not allowable costs. TDH reserves the right to reject any or all applications and is not liable for any costs incurred by the applicant in the development, submission, or review of the application.

B. Right to Amend or Withdraw RFP

TDH reserves the right to alter, amend, or modify any provisions of this RFP or to withdraw this RFP at any time prior to the execution of a contract pursuant thereto if it is in the best interest of TDH and the State of Texas. The decision of TDH will be administratively final in this regard.

C. Financial and Administrative Requirements

If an applicant has not had a contract with TDH within the past twenty-four (24) months, the applicant will submit with its application a copy of the applicant's most recent Balance Sheet and Statement of Income and Expenses. TDH will evaluate the financial statements and may, at its sole discretion, reject the application on the grounds of the applicant's financial capability.

All current contractors and/or selected applicants administering two or more TDH contract attachments are required to maintain integrity between the transactions affecting each contract attachment by (1) maintaining a completely separate set of records for each contract attachment or (2) establishing within the chart of accounts and general ledger a separate set of accounts for each contract attachment.

The applicant is encouraged to secure additional funds from other sources as necessary to strengthen the overall application.

D. Authority to Bind TDH

The Commissioner of Health or the Chief, Bureau of Financial Services (or a designee), are the only individuals who may legally commit TDH to the expenditure of public funds. No costs chargeable to the proposed contract can be reimbursed before TDH receives a fully-executed contract.

E. Right to Access Data

If the project involves the development or collection of data (statistical or identifiable by source), the data itself will be a deliverable under the TDH contract. The TDH shall retain the right to access the data, including receipt of copies of the data, upon TDH's request. The TDH acknowledges that it will work with contractors on issues relating to the format of the data supplied to TDH. The TDH may use the data for public health or state governmental noncommercial purposes.

A contractor may publish the results, findings, and lessons learned of the contract performance in accordance with the general contract provisions. The provision relating to publication of results and findings (Article 9 of the Fee-For-Service general provision) apply even after the termination of the contract. The TDH shall retain the right to review all submissions for publication relating to this contract performance prior to submission.

F. Contracting with Subrecipients and Vendors

A selected applicant may enter into contracts with subrecipients or procurement contracts with vendors. Applicant will be responsible to TDH for the performance of any subrecipient or vendor.

If the applicant enters into contracts with subrecipients or procurement contracts with vendors, the documents will be in writing and will comply with the requirements specified in the Contracts with Subrecipients and Contracts for Procurement articles in the General Provisions for Texas Department of Health Grant Contracts (see the TDH Grants Management Website at: <http://www.tdh.state.tx.us/grants/genprov/default.htm>).

If an applicant plans to enter into a contract which delegates a substantial portion of the scope of the project i.e. \$25,000 or 25% of the applicant's approved funding, the applicant must submit justification to TDH and receive prior written approval from TDH before entering into the contract.

G. Protest of Application or Bid Denial

TDH has established a procedure for dispute resolution for any applicant that has responded to this RFP. An applicant may request review of a TDH action that denies the award of a contract to that applicant after response to this solicitation by following the procedures and time frames included in **APPENDIX F: TDH Executive Order XO-0110, Protest of Application or Bid Denial.**

H. Confidential Information

The applicant must clearly designate any portion(s) of the applications that contains confidential information and state the reasons the information should be designated as such. Marking the entire application as confidential shall neither be accepted nor honored. If any information is marked as confidential in the application, TDH shall determine whether the requested information may be excepted from disclosure under the Public Information Act, Texas Government Code, Chapter 552, VTCA. If it constitutes an exception and if a request is made by any other entity for the information marked as confidential, the information may be excepted from disclosure and shall be forwarded to the Texas Attorney General along with a request for a ruling on its confidentiality. Applicants are advised to consult with their legal counsel regarding disclosure issues and to take the appropriate precautions to safeguard trade secrets or any other confidential information. Following the award of any contract, applications to this RFP are subject to release as public information unless any application or specific parts of any application can be shown to be exempt from the Public Information Act, Chapter 552, Texas Government Code.

I. RFP and Contract Amendment Authority

The TDH Office of Public Health Practice is the only office authorized to clarify, modify, amend, alter, or withdraw project requirements; terms and conditions of the RFP; and any contract awarded as a result of this RFP. All communications concerning this RFP must be addressed **in writing and may include e-mail** to:

Ms. Suzanne Sparks, Public Health Improvement Grant
Coordinator
Office of Public Health Practice
Texas Department of Health
1100 W. 49th St.
Austin, TX 78756-3199
Fax: (512) 458-7407
E-mail Address: suzanne.sparks@tdh.state.tx.us

The physical address for overnight and personal deliveries is:

Office of Public Health Practice
Texas Department of Health
1100 W. 49th St.
Austin, TX 78756-3199

X. BLANK FORMS AND INSTRUCTIONS Listed below are the required forms that must be used for submitting the Screening Application and Full Application for Public Health Improvement Grants. These forms may be obtained from the website at www.tdh.state.tx.us/phimprovement

- Screening Application
 - Form A-1 - Cover Page
 - Form B-2 – Proposal Description
 - Form C-1 – Proposed Budget Summary
- Full Application
 - Form A – Face Page – Application for Financial Assistance
 - Form B – Application Checklist
 - Form C – Program Contact Information
 - Form D - Administrative Information
 - Form E – Project Abstract
 - Form F – Description of Target Population
 - Form G – Organizational Experience
 - Form H – Project Description and Work Plan
 - Form I – Performance Measures
 - Form J– Quality Assurance
 - Form K – Dissemination Plan
 - Form L 1-L7 – Budget Summary and Detail Pages
- Additional Required Forms Required for Full Application
 - Form M1-M5 - Historically Underutilized Businesses (HUBs)
 - Form N - Nonprofit Board of Directors and Executive Director Assurances Form

XI APPENDIX

- Appendix A – TDH Assurances and Certifications
- Appendix B – Ten Essential Public Health Services
- Appendix C – Research-Based Healthy Eating and Physical Activity Intervention Resources
- Appendix D - Research-Based Vaccination Coverage Intervention Resources
- Appendix E - Sample Letter of Collaboration
- Appendix F - Protest of Application or Bid Denial for Client Services
- Appendix G - Definitions